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APPLICANTS

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** CONTINUING DATA ***** none *gh*

** FOREIGN APPLICATIONS ***** none *gh*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after All claims	STATE OR COUNTRY PA	SHEETS DRAWING 3	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
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Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials

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TITLE
 Clutter normalization by adaptation of transmit waveform

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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